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Headline: Navy Medicine continues hurricane recovery assistance

By Earl W. Hicks, Bureau of Medicine and Surgery

WASHINGTON -- As the Hurricane Mitch recovery efforts continue in Central America, Navy preventive medicine teams have joined the Operation Central American Relief effort to ensure that American military personnel and local citizens have the means to fight illness and disease.

Navy preventive medicine teams are now in Central America checking water sources for potability, applying mosquito control programs, conducting disease and insect surveillance, performing food inspections and compiling infectious disease diagnostics for the area.

Specialists in environmental health, infectious disease, entomology, microbiology, industrial hygiene and general preventive medicine comprise units in Honduras, Nicaragua and El Salvador. Navy Environmental and Preventive Medicine Unit-2 (NEPMU-2) from Norfolk, Va., and a Disease Vector Ecology and Control Center (DVECC) unit from Bangor, Wash., are in Nicaragua. Navy Environmental and Preventive Medicine Unit-5 and a DVECC unit from Jacksonville, Fla., are in Honduras.

And it is a dedicated Navy medical team assisting the Central American people. Hospital Corpsman First Class Vernon Stiles of the DVECC team from Jacksonville, Fla., knows the importance of their effort in El Salvador.

"I had a mission and felt appreciated," he said. "We

are providing a valuable service to a flood-ravaged country in which vectors [disease carriers] can multiply swiftly and introduce disease into our troops if we do not provide rapid and effective vector control."

According to NEPMU-5's Officer In Charge, CDR Arthur Wood, Medical Service Corps, his team has provided assessments of hurricane damage and sanitary measures in San Pedro Sula, La Cieba, and Santa Rosa de Aguan in the northern region and Choluteca in the southern part of Honduras. They have also worked at the new Joint Task Force Eagle compound at the Comolapa Air Base in El Salvador. Wood said that his personnel make recommendations about sanitary procedures and determine logistical problems of each area that would make preventive medicine support difficult.

Wood said his teams augment the work of the Soto Cano Air Base, Nicaragua, medical element and preventive medicine staff, including participation in medical readiness training missions to provide medical service to remote villages. The preventive medicine technicians have integrated with the base preventive medicine staff to monitor water, inspect base and area restaurants and U.S. embassy food facilities. They have also provided education and reminders for base personnel that will help them remain healthy in the current environment. The NEPMU-5 vector control personnel have held training sessions for other preventive medicine teams in mosquito identification and the use of vector control spray equipment.

Hospital Corpsman First Class Thomas Henderson, a NEPMU-5 preventive medicine technician from Freeport, Ill., has attacked some of the problems such as insecticide spraying and food and water inspections. Henderson said that this hurricane, which also destroyed the country's banana crops, among other damage, reminds him of the destruction caused by Mount Pinatubo in the Philippines in August 1993. But he said a side benefit of the operation is the "jointness" of the mission, which has helped him understand the language and methods of doing preventive medicine with the Army and Air Force.

Deployed field units, especially Seabees and Marines, also receive assistance from the preventive medicine teams. That help came in the form of insect spraying missions at the Comolapa facility, and then two more in San Pedro Sula and on the Mosquito Coast.

Hospital Corpsman Second Class Margaret Wayland of the DVECC Jacksonville, Fla., unit provides preventive medical support to the Seabees. According to her, this first field assignment is an opportunity to apply all of the theory learned while in preventive medicine school.

"I knew more than I thought I did, things just clicked in from what I learned in school," she said.

Another effort is collecting disease incidence data from the hospital and aid stations. An infectious disease physician works in a laboratory capable of diagnosing most

of the tropical diseases expected in this area, including malaria, dengue, diarrhea and leptospirosis.

The NEPMU and DVCC are part of the Naval Environmental Health Center headquartered in Norfolk, Va. The teams provide consultative medical support to Fleet and Marine forces in occupational and environmental health and also preventive medicine.

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Headline: Needy children receive care from Portsmouth doctors

By LT Rees Lee, Medical Corps, Naval Medical Center Portsmouth

CHESAPEAKE, Va. -- With rising health care costs and increasingly restrictive Medicaid support, more working low-income families are turning to free clinics for their health care. At the Chesapeake Care Free Clinic in the Indian River section of Chesapeake, the demand by patients seeking care has been increasing approximately 10 to 15 percent each year. At the same time, there has been a severe shortage of physicians willing to volunteer at the clinic. Some patients have actually been turned away. Turning children away is especially difficult when their needs cannot be served.

Though the need for enthusiastic physician volunteers remains, the Chesapeake pediatric clinic has been supported since February from an unexpected source -- the U.S. Navy. Sixteen Navy pediatricians from Naval Medical Center Portsmouth provide a revolving volunteer pool at the clinic. According to Janet Call, the free clinic's executive director, the Navy pediatricians account for nearly 75 percent of all pediatricians who volunteered at the clinic this year.

"The support of the pediatricians from the Naval Medical Center has been wonderful and vital to keeping the weekly pediatric clinic running," said Call.

"I'm not surprised by the level of interest in the free clinic," said CDR Ken Norwood, Medical Corps, Head of the Pediatrics Department at the naval hospital. Norwood is also a regular volunteer at the free clinic.

"Providing humanitarian support is part of the mission of a Navy pediatrician. We have sent pediatricians to the Persian Gulf, Bosnia and Ethiopia. Our department has a pediatrician in Honduras as part of the relief effort in the wake of Hurricane Mitch. Providing care at Chesapeake Care Free Clinic is just an extension of our pediatricians commitment to serve the neediest children, whether locally or on foreign shores."

Over half of the Navy volunteers at the clinic are senior pediatric residents. During resident status, doctors complete their specialty training. According to Air Force Lt.Col Robert Ellis, MD, the NMCP pediatric residency director, volunteering at the free clinic enhances the educational experience of the residents.

"The Naval Medical Center has a complete range of pediatric medical and surgical specialists to assist the residents in the treatment of their patients. For those residents that volunteer at the free clinic, it offers the unique experience of treating patients without the immediate availability of this support network. Residents become comfortable treating patients using very limited resources."

The Chesapeake free pediatric clinic is open every Tuesday evening. A typical pediatrics staff includes one doctor and two nurses to see children. The pediatricians from Naval Medical Center Portsmouth volunteer during their own personal time after Navy clinics have closed for the day.

Medical professionals interested in volunteering at the clinic can call 757-366-0303 or e-mail <chescare@pinn.net>
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Headline: Okinawa shows how to be customer friendly
By LT Phillip M. Sanchez, Medical Service Corps, U.S. Naval Hospital, Okinawa

OKINAWA, Japan -- The U.S. Naval Hospital Okinawa has a "Customers First" attitude and is proud to show it. In the last few months the hospital has implemented several new managed care initiatives focused on improving both access to care and customer service.

To expedite care outside of its customers' Western Pacific area, the Okinawa TRICARE Service Center developed a new enrollment card for them, which eased acquiring care outside their normal service area.

The enrollment card remedied that situation and also makes it easier for customers to use civilian healthcare. Civilian providers recognize the card as proof that the individual is a member of TRICARE Pacific Prime. And the card is not just a reminder of its carrier's medical affiliation. The card has phone numbers and other important information printed on the back to assist members while traveling.

It became clear to the TSC that keeping its customers informed about TRICARE benefits would help them make better decisions, so a Marketing Division was established to educate their potential customers about TRICARE benefits. The marketing team began writing newspaper and magazine articles, and sending the information to local radio stations as well.

The marketing effort of the TSC has paid off. Since TRICARE Prime began enrolling family members in June 97, enrollment figures have grown to over 86 percent of the eligible population and it continues to rise. Another idea from the marketing team took the information process a step further. If various media could be used to inform people about joining TRICARE, then those same media outlets could also keep TRICARE customers in the know about good health.

So, the Naval Hospital started a local television broadcast called "Healthline," which is dedicated to addressing customer's health issues such as dental care, optometry issues, mental health considerations and hearing concerns. Also covered were issues relating to pediatric care, nutrition, preventing domestic violence and immunization requirements. The command started a cancer support group, which is also being broadcast. Those information initiatives were successful and that left another niche to fill - well trained representatives to explain the benefits of TRICARE membership. The TSC promptly started a TRICARE Service Representative Course for healthcare professionals on Okinawa. Students of this course receive a certificate that recognizes them as the TRICARE ambassador for their respective clinic. The course covers TRICARE program options, beneficiary information, counseling, and TRICARE Western Pacific policies.

LCDR Chris Ward, Nurse Corps, in the hospital's pediatrics department says, "The TRICARE service representative course was an excellent refresher for me. This class, along with its [well organized information handouts], has allowed me to advise staff and beneficiaries alike efficiently and effectively."

To keep the "Customer First" theme going, the hospital now has routine appointment scheduling through an email appointment system on the hospital's homepage www.oki.me.navy.mil. The appointment system is getting great reviews from customers.

"I think this is the best thing you could have done to help solve the major problem of waiting for an appointment," said MSgt Bradley J. Blocker, NCOIC, Disbursing, Marine Corps Base, Camp Smedley D. Butler. "My hat's off to your establishment. This should be used as a stepping stone for other clinics around the world to follow."

Although the new email system allows greater access for appointments by providing more options for the hospital's customers, the hospital still keeps phone lines open for patients who don't have Internet capability. With all the improvements and initiatives being offered, U.S. Naval Hospital Okinawa did not forget making hours of clinic access convenient. Five Primary Care Manager sites offer after-hours care. Three of the Family Medicine clinics have opened their appointment schedules Monday and Wednesday evenings and on Saturday. To support dual working and single parent families, the pediatric facility has an after-hours acute care clinic.

Providing further assistance for after-hours care, the internal medicine clinic has just been designated as a PCM and also offers after-hours care on Mondays until 7 p.m. As a final touch to considering its customers when planning service, the hospital has a dedicated TRICARE web page to keep customers informed about their Military Health Care Plan. The hospital also recently updated its web page

on Health Benefits. And, as one more customer friendly act, customers can now get detailed information on claims processing at the web site.

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Headline: Charleston wins Elmo R. Zumwalt award
From Naval Hospital Charleston

CHARLESTON, S.C. -- Naval Hospital Charleston recently won the Elmo R. Zumwalt Award for Excellence in Bachelor Housing.

"We are very proud of what we have achieved, said LT Brian Hutchison, Medical Service Corps, head of operating management for the hospital. "We started about 16 months ago, working towards the Zumwalt criteria for an end goal. Much of the work was self-help and utilized existing facilities staff instead of contracting out for many of the upgrades.

"Hearing sailors say I am going home and mean the barracks, makes it all worthwhile. Morale among our young sailors has improved greatly. I am proud of all the hard work of the staff to achieve this award."

The barracks complex has 64 rooms. Each sailor has a single room with a sitting room shared between four rooms. Each room has it's own private bath, full size refrigerator, microwave, television and 55-channel cable television hookup. There is a phone in each room for unlimited local calls for free. The common areas have game tables, comfortable living room furniture, big screen TV, fully equipped kitchen, and BBQ area. Outside are newly renovated basketball courts, volleyball pit and tennis court.

Quality housing has made a difference for medical personnel at Charleston. And because living in the barracks is voluntary, the residents expect a lot from their quarters.

"I have been living here for one and a half years, and the atmosphere here in the barracks is a lot different than when I first got here," said Hospital Corpsman Second Class Mark Ray. "This is now the best barracks I have lived in during my 12 years of active service."

Fellow barracks dweller, Mess Management Specialist Third Class William Kay, has similar appreciation of the barracks.

"The barracks have really improved during my stay, he said. "The people that manage the barracks really try to make it seem like home. It is like living in a hotel. We have cable, a phone, and a good size television in each room.

The Zumwalt Awards will be presented to accredited five-star commands during Navy Days activities at the Housing Management Association professional development seminar in Louisville, Ky., February 17, 1999.

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Headline: Recruiters provide quality medical personnel for Navy

From Bureau of Medicine and Surgery

WASHINGTON -- During a time of recruiting shortfalls for the Navy, two officer-recruiting officers are doing their part to keep the Navy medical team billets filled with talented and dedicated medical personnel.

LT David E. Nieves, Medical Service Corps, a New York City native, was selected as Navy Recruiting Command's Medical Recruiter of the Year and Officer Recruiter of the Year out of 393 officer recruiters nationwide for 1998. LT Amy Whitwell, Medical Service Corps, was named Medical Recruiter of the Year for Navy Recruiting District New York. Nieves' recruiting accomplishments brought in 16 officers that included two private practice orthopedic surgeons, a private practice family practitioner, a first year general surgery resident and a first year orthopedic surgery resident, among others.

Nieves said that "persistence pays off" when contacting future medical officers. The way he tackles the business of medical recruiting is to stay focused and motivated. He never gives up on himself and his ability to attract, educate and contract prospective medical professionals. Whitwell, who just as Nieves, must market, prospect, recruit and process for all physician, medical service and nurse programs, does her job in the hustle of metropolitan New York city.

"In the New York City Financial District, I learned only the best and most professional will succeed," she said. "I pay attention to the details on all marketing materials, personal correspondence and processing activity. Above all my most important tool is networking."

Whitwell has shown promoting consistency in the face of adversity will bring about positive results. "Persistence and determination allowed me to achieve my goal of being the best recruiter I could be," said Whitwell.

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Headline: Navy Environmental Health Center 1999 awards program

From Naval Environmental Health Center

NORFOLK, Va. -- The Navy Environmental Health Center, on behalf of the Chief, Bureau of Medicine and Surgery, Washington, D.C., recognizes the abilities and accomplishments of several outstanding occupational health and preventive medicine professionals each year through the Navy Occupational Health and Preventive Medicine Workshop Awards Program.

Although the workshop has been cancelled for calendar year 1999, the Navy Environmental Health Center will continue the tradition of presenting these awards to outstanding individuals: the CAPT Ernest W. Brown Award for Excellence in Occupational Health, the RADM Charles S. Stephenson Award for Excellence in Preventive Medicine and the HMCM Stephen W. Brown Award for Preventive Medicine Technician of the

Year.

Active duty Navy and civil service personnel may be nominated for the awards by commands and colleagues. Nomination packages are available on the Internet at <http://www-nehc.med.navy.mil>, or packages may be requested from LT Fred Cardwell, Medical Service Corps, 2510 Walmer Ave., Norfolk, VA 23513-2617-2617, FAX DSN 564-1345, (757) 444-1345, telephone DSN 253-5616, (757) 462-5606, e-mail cardwellf@nehc.med.navy.mil. Packages must be received by February 14, 1999.

Commands may also apply for two other non-competitive awards presented each year: the Navy Environmental Health Center Award for Command Excellence in Health Promotion, and The Commanding Officer's Award presented to an individual, selected by the Commanding Officer, Navy Environmental Health Center, who demonstrates outstanding support of Navy Occupational Health and Preventive Medicine.

Award recipients will be announced at a special presentation in April 1999.

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Headline: TRICARE question and answer

Question: What is the Point-of-Service option for TRICARE Prime

Answer: If you're a TRICARE Prime enrollee, you also have what's called a point-of-service option. This means that you can choose to get TRICARE-covered non-emergency services outside the Prime network of providers without a referral from your Primary Care Manager and without authorization from the Health Care Finder. However, if you choose to get care under the POS option, there's an annual deductible (for both inpatient and outpatient care) of \$300 for an individual and \$600 for a family. After the deductible is satisfied, your cost-share will be 50 percent of the TRICARE allowable charge. Any additional charges by non-network providers are also your responsibility: up to 15 percent above the allowable charge, as permitted by law. POS cost sharing may also apply to services you received from a Prime network provider if you didn't get the required advance authorization for the care. Check with your TRICARE Service Center for more information.

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Headline: Healthwatch: Green tea protects against cancer, or does it?

By Kimberly A. Rawlings, Bureau of Medicine and Surgery

WASHINGTON -- Teatime may soon replace the coffee break. Imagine consuming at least three cups of green tea to prevent cancer, heart disease and cavities.

Recent studies in laboratory animals showed green tea from the plant camellia sinensis, may help reduce the risk of cancer. The isolated antioxidant in green teas possess chemicals believed to counteract harmful compounds thought

to contribute to cancer by damaging healthy deoxyribonucleic acid or better known as DNA, the material that contributes to our hereditary characteristics.

The University of Kansas researchers measured the antioxidant content of green tea and found that it is 100 times more effective than vitamin C and 25 times better than vitamin E at protecting cells from damage believed linked to cancer, heart disease and other illnesses.

However, these same antioxidants are also found in fruits and vegetables at varying levels. While some say tea may contain a stronger concentration, it is no alternative to eating a well balance diet.

"I always caution people not to look for the magic pill," said LT Laura Greiman, Medical Service Corps, registered dietitian at Naval Medical Center San Diego. According to Greiman, there have also been conclusive studies that suggest people who eat more fruits and vegetables have a lower risk for cancer.

Green tea research and oral hygiene have also paired with additional significant findings. One such study at the Chinese Academy of Preventative Medicine in Beijing studied 59 patients with precancerous lesions in the mouth. When the patients drank or applied tea to the mouth, the precancerous cells stopped growing and began to heal.

The University of California, Berkley found another substance in green tea, which blocks the attachment of bacteria to teeth to help protect against cavities.

Although green tea appears to have healthy qualities, it has not been proven conclusive.

"There has been research that show benefits, but it warrants more research and further investigation," Greiman said.

Even with the recent findings there have also been pitfalls that do not support the claims. In a comparison of tea drinkers and non-tea drinkers, one study found tea drinkers to have higher cancer rates than non-tea drinkers; two other studies showed tea had no effects.

Greiman recommends a well-balanced diet as one of the best preventive measures for chronic diseases. She added that before teas can be proven to be the panacea for cancer, scientists are going to have to perform more conclusive studies with human trials as they meet the challenges of sorting out possible variable factors such as a person's genetic make-up, diet, environment and outside influences.

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Comments about and ideas for MEDNEWS are welcome. Story submissions are encouraged. Contact MEDNEWS editor, Earl Hicks, at email: mednews@us.med.navy.mil; Telephone 202/762-3223, (DSN) 762-3223, or fax 202/762-3224.

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